OIPE		PART B	- FEE(S	) TRAN	ISMITTAL			
Complete and send this form, together with applicable			fee(s), to: Mail  Mail Stop ISSUE FEE  Commissioner for Patents P.O. Box 1450  Alexandria, Virginia 22313-1450			r Patents	·	
2	<u>#</u>			<u>Fax</u>	(703) 746-4000			
NSTRUCTIONS: This for appropriate. All further on indicated unless corrected maintenance fee notification	repshould be used for tran respondence including the loclow or directed otherwise is.	smitting the ISSU Patent, advance or in Block 1, by (a	JE FEE and rders and not ) specifying	PUBLIC tification a new co	ATION FEE (if requi) of maintenance fees we rrespondence address;	ired). Blocks I through 5 s vill be mailed to the current and/or (b) indicating a sep	hould be completed where correspondence address as arate "FEE ADDRESS" for	
	E ADDRESS (Note: Use Block I for 12/06/2004	any change of address)			Note: A certificate of Fee(s) Transmittal. Th papers. Each additiona have its own certificate	mailing can only be used f is certificate cannot be used il paper, such as an assignme of mailing or transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, must	
MILES & STOC 1751 PINNACLE SUITE 500 MCLEAN, VA 22		:	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.					
10/2005 GWORDOF2 00000136 501165 10736513							(Depositor's name)	
C:2501					· · · · · · · · · · · · · · · · · · ·		(Signature)	
C:1504	300.00 OP	700.00 OP 300.00 OP					(Date)	
C: 8001 - 15.00 APPLICATION NO.	FILING DATE	FIRST NAMED INVE			TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/736,513	12/17/2003		Douglas A	.J. Mocke	ett	T3488-908163US02	6208	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$685			\$300	\$985	03/07/2005	
1 EXAMINER		ART UNIT		CL	ASS-SUBCLASS			
MAH, CHUCK Y		3676			016-002100			
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
	RESIDENCE DATA TO B			•	•• /	ee is identified below the	document has been filed for	
recordation as set forth in	1 37 CFR 3.11. Completion	of this form is NO	T a substitute	for filing	an assignment.	12 12 1401111104 001011, 4110		
(A) NAME OF ASSIGN	EE	(B	B) RESIDEN	CE: (CIT	Y and STATE OR CO	UNTRY)	•	
lease check the appropriate	e assignee category or catego	ries (will not be pri	inted on the j	patent) :	☐ Individual ☐ Co	orporation or other private gr	roup entity Government	
Issue Fee			b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.					
Publication Fee (No small entity discount permitted)  Advance Order - # of Copies5			Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number					
Advance Order - # o	Copies 5		Deposit Acc	rector is h count Nur	ereby authorized by c nber	narge the required fee(s), of 5 (enclose an extra	copy of this form).	
a. Applicant claims S	(from status indicated above MALL ENTITY status. See	37 CFR 1.27.				LL ENTITY status. See 37 (		
The Director of the USPTO NOTE: The Issue Fee and Ponterest as shown by the received	is requested to apply the Issuublication Fee (if required) vords of the United States Pate	ne Fee and Publicate will not be accepted ent and Trademark	tion Fee (if a d from anyon Office.	ny) or to ne other th	e-apply any previousl an the applicant; a reg	y paid issue fee to the applic istered attorney or agent; or t	ation identified above. the assignee or other party in	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

James T. Carmichael

Authorized Signature \_

Typed or printed name

Registration No.

January 7, 2005

45,306

PTO/SB/21 (09-04)

Approved for use through 07/31/2006 OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

> ADEMAKK		Application Number		10/736,513						
TRANSMITTAL	Filing Date		December 17, 2003							
FORM	First Named Inventor		MOCKETT, DOUGLAS A. J.							
	Art Unit		3676							
(to be used for all correspondence after initial filing)	Examiner Name		C. MAH							
Total Number of Pages in This Submission		Attorney Docket Number		T3488-908163US02						
ENCLOSURES (check all that apply)										
□ Fee Transmittal Form □ A □ Fee Attached □ Amendment / Reply □ After Final □ Affidavits/declaration(s) □ Extension of Time Request □ Express Abandonment Request □ Information Disclosure Statement □ Certified Copy of Priority □ Document(s) □ Reply to Missing Parts/ □ Incomplete Application		signment Papers or an Application) awing(s) cclaration and Power of torney censing-related Papers tition tition to Convert to a covisional Application wer of Attorney, evocation Change of orrespondence Address rminal Disclaimer equest for Refund D, Number of CD(s)								
			payments to Deposit Account No. 50-1165 the above identified docket number.							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT										
Firm Name Customer No	Customer No. 000181									
Signature T										
Printed Name James T. Carmichael, Reg. No. 45,306										
Date January 7, 2005										
CERTIFICATE OF MAILING OR TRANSMISSION										
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to: Mail Stop, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at, on										
Signature:										

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Name: